



**VLMFSS**

**VANCOUVER & LOWER MAINLAND  
MULTICULTURAL FAMILY SUPPORT SERVICES SOCIETY**

**SHASHI ASSANAND BURSARY**

**Application Form**

**NAME:** \_\_\_\_\_

**First**

**Middle**

**Last**

**ADDRESS:** \_\_\_\_\_

**Apt. No.**

**Street**

**City**

**Province**

**Postal Code**

**CONTACT:** \_\_\_\_\_

**Home Phone**

**Cell No**

**Email Address**

**DATE OF BIRTH:** \_\_\_\_\_ **COUNTRY OF ORIGIN:** \_\_\_\_\_

**YEAR OF YOUR OR YOUR FAMILY ARRIVAL IN CANADA:** \_\_\_\_\_

**EMPLOYMENT: Mother;** \_\_\_\_\_

**Father:** \_\_\_\_\_

**FAMILY ANNUAL INCOME (please attach income tax assessments):** \_\_\_\_\_

**Mother:** \_\_\_\_\_ **Father:** \_\_\_\_\_

**NAME AND ADDRESS OF YOUR PRESENT SCHOOL:** \_\_\_\_\_

**PROGRAM/STUDIES YOU WISH TO PURSUE:** \_\_\_\_\_

**POST-SECONDARY PROGRAM COMMENCEMENT YEAR/DATE:** \_\_\_\_\_

*(Attach Letter of Acceptance to the program)*

**SHARE YOUR STORY IN NOT MORE THAN 500 WORDS ABOUT YOUR INDIVIDUAL AND FAMILY EXPERIENCES IN CANADIAN LIFE, HOW YOU IMPACTED THE LIFE OF OTHERS IN YOUR COMMUNITY AND YOUR PLANS FOR THE FUTURE.**

**Attach two references one from the school and one from a Community organization (see eligibility criteria in the Shashi Assanand Bursary information document) for details.**

**DEADLINE FOR APPLICATIONS IS MAY 15<sup>th</sup>, 2024.**